FOT 000005727

| (Requestor's Name) | | | | |
|---|----------------|-------------|--|--|
| (Address) | | | | |
| (Ad | dress) | | | |
| (City/State/Zip/Phone #) | | | | |
| PICK-UP | ☐ WAΠ | MAIL | | |
| (Business Entity Name) | | | | |
| (Document Number) | | | | |
| Certified Copies | _ Certificates | s of Status | | |
| Special Instructions to Filing Officer: | | | | |
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Office Use Only



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R. WHITE



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper ami.casper@cscglobal.com

Date: March 31, 2020

Order#: 236567-180

Re: SOURCEPOINT, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35 _.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX___ Please return evidence to the following:

Attn: Ami Casper

c/o Corporation Service Company

251 Little Falls Drive Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

| statement of cha | mge is submitted for a corporation c | 7.0502, 607.1508, or 617.1508, Florida S organized under the laws of the State of _ registered agent, or both, in the State of Fi | Delaware |
|---|--|---|----------------------|
| 1. The name of | the corporation: SOURCEPOINT, I | INC. | |
| 2. The principal | office address: 2330 Commerce Pa | ark Drive, NE, Suite 2, Palm Bay, FL 32 | 905 |
| 3. The mailing a | address (if different): | | |
| 4. Date of incorp | poration/qualification: 11/19/2007 | Document number: F070000 | 005727 |
| 5. The name and | | ered agent and registered office on file wit | |
| | NRAI Services, Inc. | | 913 |
| | 1200 South Pine Island Road | | |
| | Plantation | FL 33324 | 10 |
| 6. The name and (if changed): | d street address of the new registered | l agent (if changed) and /or registered offi | F.31 II: 52 |
| | Corporation Service Company | | . • |
| | 1201 Hays Street | | |
| P.O. Box. NOT acceptable | | | |
| | Tallahassee | FL 32301 | |
| as changed will | be identical. | treet address of the business office of its | |
| Such change was authorized by the | as authorized by resolution duly ad- ne board, or the corporation has bee | opted by its board of directors or by an or en notified in writing of the change. | officer so |
| X | e & agnie | Jill Cilmi, Vice President | |
| / 1 | re of an officer or director | Painted or typed name and titl | e |
| I further tigree to of my duties, and document is being corporation has | to comply with the provisions of all ad Lam familiar with and accept the | nt and agree to act in this capacity. I statutes relative to the proper and come e obligation of my position as registered in the registered office address. I hereby ange. | 'asient. Or. 11 thi: |
| By: Clu | Miley | 03/31/2020 | |
| · | nature of Registered Agent half of an entity: | Date | |
| _ | • | | |
| | Asst. Vice President yped or Printed Name | | |

* * * FILING FEE: \$35.00 * * *